

**Trip Report: Preparation and Planning for Pharmaceutical and Laboratory
Assessment in HIV/AIDS, TB and Malaria (including IPT)**

November 29 – December 10, 2004

**Jane Briggs
Jennifer McCollum**

Printed: January 2005

Rational Pharmaceutical Management Plus Program
Center for Pharmaceutical Management
Management Sciences for Health
4301 North Fairfax Drive, Suite 400
Arlington, VA 22203 USA
Phone: 703-524-6575
Fax: 703-524-7898
E-mail: rpmpplus@msh.org

This report was made possible through support provided by the U.S. Agency for International Development, under the terms of cooperative agreement number HRN-A-00-00-00016-00. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the U.S. Agency for International Development.

Recommended Citation

Briggs, Jane and Jennifer McCollum. 2004 *Trip Report: Preparation and Planning for Pharmaceutical and Laboratory Commodity Assessment in HIV/AIDS, TB and Malaria (including IPT)* Submitted to the U.S. Agency for International Development by the Rational Pharmaceutical Management Plus Program. Arlington, VA: Management Sciences for Health.

Contents

Acronyms	4
Background	5
Purpose of Trip	6
Scope of Work	6
Activities	6
Collaborators and Partners	8
Adjustments to Planned Activities and/or Additional Activities	8
Next Steps	10
Immediate Follow-up Activities	10
Important Upcoming Activities or Benchmarks in Program	10
Recommendations	10

Acronyms

ANC	Ante natal care
ARV	Anti retrovirals.
CHU/Fann	Centre Hospitalier universitaire (University hospital)
CNLS	Comite National de Lutte contre le SIDA (National AIDS Committee)
CPN	Antenatal Consultation (consultation pre-natale)
DANSE	Division d'alimentation et nutrition et la survie de l'enfant
DLS	Division de la lutte contre la SIDA
DPL	Directeur de la Pharmacie et des Laboratoires
DRH	Directeur des Ressources Humaines
DSSP	Division des Soins de Santé Primaires
FHI	Family Health International
IMCI	Integrated Management of Childhood Illness
ISAARV	Senegalese Initiative for Access to Anti-Retrovirals
ISH	Institut d'hygiène sociale
MCD	Médecin Chef de District
MoH	Ministry of Health
MSH	Management Sciences for Health
PNA	Pharmacie National d'Approvisionnement (central medical stores)
PNLP	Programme National de Lutte contre la Paludisme (National Malaria Program)
PNLT	Programme National de Lutte contre la Tuberculose (National TB Program)
PRDU	Promoting Rational Drug Use
RPM Plus	Rational Pharmaceutical Management Plus
SP	Sulphadoxine-Pyrimethamine
USAID	U.S. Agency for International Development
WHO	World Health Organization

Background

Senegal has a relative low prevalence of HIV (1.4) compared to other African countries and it was estimated at the end of 2000 that about 80,000 persons were infected with HIV. Since 1998, the Senegalese Initiative for Access to Anti-Retrovirals (ISAARV) has been providing diagnostic testing, treatment and prevention of opportunistic infections, biological monitoring and anti-retroviral treatment, to people living with HIV/AIDS in an initial pilot phase in Dakar, expanding to 9 of the 11 regions of the country in 2003 and planning to expand to all 11 regions by the end of 2004. These services will be offered through the regional hospitals.

USAID has commissioned a survey to evaluate the logistics system for commodities in the context of ISAARV to recommend improvements to the system in order to ensure long term quality service delivery on a national scale. Due to the clear link between HIV and TB, the distribution system for TB medication and lab supplies will also be evaluated. Additionally, due to the recent changes in malaria treatment policy, this opportunity is to be used to assess availability of anti-malarials.

RPM Plus was requested by USAID-Senegal to provide technical input to the survey in collaboration with other partners, namely MSH and FHI.

The objective of the survey is to evaluate the logistics and distribution systems for HIV/AIDS, TB and malaria commodities within the context of ISAARV, PNLT and PNLP and make recommendations for improvement and possibly integration of systems.

The specific objectives for this activity are:

- i. To assess management and distribution mechanisms at central and peripheral levels regarding 1) commodities required for comprehensive HIV/AIDS testing and treatment in regional hospitals; 2) amodiaquine, quinine and S.P. as malaria tracer drugs and 3) TB drugs in health post and centers. This assessment should include all relevant institutions involved in ISAARV: DLS, National Reference Laboratory/Dantec, CHU/Fann, ISH, PNA, treatment sites at central and regional levels, and the CNLS as well as the PNLT and PNLP.
- ii. To provide an evaluation report on the logistics systems that addresses concerns and recommendations expressed by all above noted institutions, and outlines recommended improvements for:
 - a) Data management and communication between institutions across all levels
 - b) Drug/commodity distribution channels between central and peripheral levels
 - c) Stock management at central and peripheral levels
 - d) Training requirements at central and peripheral levels
 - e) Equipment/infrastructure needs at central and peripheral levels
 - f) Financial sustainability of the system at all levels
- iii. To organize and facilitate a national workshop including all stakeholders to:
 - a) Disseminate the results of the evaluation

- b) Review and validate recommendations
 - c) Draft a work plan
- iv. To develop a work plan with calendar and technical assistance needs to strengthen the system. This work plan should include a training plan, procurement plan, and a monitoring plan to guide regular assessments of the functioning of the logistics system.

Purpose of Trip

The purpose of the trip was for RPM Plus staff (Jane Briggs and Jennifer McCollum) to provide technical assistance and guidance in specific aspects of preparation for the survey. RPM Plus staff participated in the final validation of the instruments and indicators that they had developed with the key MoH stakeholders and assisted in the preparation and training of the data collectors.

Scope of Work

- Brief and debrief with the Mission
- Participate in the final validation of the instruments
- Assist in preparation and training of the data collectors
- Facilitate the start of the data collection

Activities

Brief and debrief with USAID.

During the briefing on December 1, 2004 with Brad Barker and Matar Camara, various aspects of RPM Plus activities in Senegal were discussed. Concerns were expressed about the packaging of the antimalarial combination in light of the plans to roll-out community level treatment of malaria using the SP/amodiaquine combination at health hut level. Jane Briggs promised to explore with the PNA the possibilities for blistering the combination. Aspects of the commodity logistics survey were discussed including ensuring that aspects of lab testing for malaria were included in the instruments. The workplan which had been submitted to USAID prior to the briefing will be discussed in the de-briefing. Concerning RPM Plus activities with private pharmacies, it was suggested that RPM Plus should meet and discuss with ADEMAs as there may be potential for collaboration and synergy. The content of the proposed training for private pharmacy sales assistants was discussed and met with USAID approval.

The de-briefing was conducted on December 10 2004, with Jennifer Adams, Brad Barker, Matar Camara and Rama Dioume. This was a rapid meeting, as the USAID staff were occupied with other activities. A very rapid overview of RPM Plus in Senegal was provided to the new PHN officer, Jennifer Adams, and a summary of the survey progress. Due to the time constraints, it was not possible to discuss the proposed RPM Plus workplan for FY04 and to ascertain if it met with Mission approval, this discussion will continue by e mail.

Final Validation of Instruments

After an initial planning meeting of the survey technical team (RPM Plus, MSH and FHI) on 1 December 2004, RPM Plus, FHI and MSH facilitated a 2-day (2 and 3 December 2004) validation of all instruments for the assessment. Nearly 25 government officials were in attendance for the review including representatives from: CNLS; DPL; DRH; PNA; DSSP; MCD Rufisque, Kaolack, Kebemer; PNLT; PNLP; WHO; USAID. The terms of reference, objectives and proposed indicators for the survey were presented and then the data collection instruments were presented. Participants provided suggestions for greater clarification in the questions and gave additional insight as to where the information could be collected (i.e. level of health system, or physical facility). All present welcomed the activity and were committed to assuring its success as the results will be essential in guiding interventions to improve the management of HIV, TB and malaria. The instruments were revised in line with the recommendations of the validation workshop in readiness for the training of the data collectors.

Preparation and training of the data collectors

RPM Plus and FHI facilitated a one-day training/orientation on 7 December 2004 at the DPL for the 20 professionals selected by the in country survey technical team, to perform the data collection. All were health professionals, the majority being pharmacists, and many had some experience in previous surveys. After an overview of the objectives of the survey and the types of indicators resulting, the pharmaceutical management and laboratory assessment tools were reviewed in detail question by question. At the end of each section, data collectors were invited to ask questions and provide suggestions for improvement/clarification. The inventory and stock out forms, forms for review and observation of Antenatal consultations and the instrument for SP availability in private pharmacies were also reviewed. At the end of the day, data collectors were divided into 4 district teams of four and 2 regional teams of two. District teams were also assigned a supervisor. District assignments for the assessment teams were randomly selected and announced.

The following morning (8 December 2004) RPM Plus, FHI and MSH accompanied the data collection teams to the Centre de Santé in Rufisque (approx. one hour from Dakar) where teams were split up to practice using the tools at the selected pre-test sites that represented different levels of the health system: Centre de Santé, Poste de Santé, Case de Santé. By two o'clock, all teams returned to Dakar to discuss the findings of the morning. Some final changes to the instruments were recommended to improve the clarity and appropriateness of the questioning. Team supervisors met with their individual teams to discuss their strategy and plan for the data collection the following week.

Facilitate the start of the data collection – RPM Plus made all changes and updates to the assessment tools and organized them for the final count and copy. Envelopes containing all necessary forms were prepared for each facility and compiled for each assessment team.

Collaborators and Partners

Barbara Sow, FHI
Dr. Abdoulath Mangane, FHI
Dr. Pape Ndao, MSH
Dr Ousmane Faye, MSH
Dr Youssoufa Lo, MSH
Dr. Touty Diack, Consultant, RPM Plus
Dr Daouda Diop, PNA
Dr Seynabou Mbengue of ADEMAs
Dr Madicke Diagne DPL
Professor Badiane, DPL
Dr Constance Tuyani, Syndicat des pharmaciens
Dr Abdoulaye Ndour, Syndicat des pharmaciens
20 data collectors from Dakar and Kaolack
Government officials from CNLS; DRH; DSSP; MCD Rufisque, Kaolack, Kebemer; PNLT;
PNLP; WHO;
Rama Dioume, USAID
Matar Camara, USAID

Adjustments to Planned Activities and/or Additional Activities

Orientation of private pharmacists

Jennifer McCollum attended the RPM Plus orientation for Private Pharmacists in St Louis on 4 December 2004. Of a total of 56 pharmacists targeted, 25 attended. This orientation was one of a series around the country, following sessions in Kaolack, Thies and Ziguinchor. The orientation covered a review of the importance of rational drug use, the history of IMCI and its introduction in Senegal, the management of childhood illness and the protocols of IMCI, malaria and the policy of combination therapy of SP/Amodiaquine. Presenters were from the DPL, DANSE and PNLP of the MoH as well as RPM Plus. The orientation was well received by the participants and a recommendation was made by the pharmacists that training sessions be organized for the counter assistants of their pharmacies. Jennifer also attended, as an observer, the final sessions of the Annual Symposium for Private Pharmacists in Senegal which was also held in St. Louis, prior to the orientation session. The orientation was scheduled immediately after the symposium, in order to maximize attendance, although many pharmacists were tired and did not attend the Sunday orientation session.

Meeting with Daouda Diop PNA, 2 December 2004

It was confirmed that the PNA has sufficient stock of SP and Amodiaquine separately packaged, although in blisters and not as loose tablets, until the end of 2005. It was agreed that the PNA would look into the possibilities of getting that stock co-packaged, either in Dakar or elsewhere although it was expected that the cost would be prohibitive. As an interim measure it was suggested that through the use of mini-grip plastic sachets, the health facility staff could package

the combination in the same package. This would help in the compliance of patients but would not facilitate the dispensing by lesser qualified staff at health hut level. The PNA will look into the possibility of procuring these sachets.

Meeting with Seynabou Mbengue of ADEMAs, 9 December 2004

On the recommendation of USAID, Jane Briggs met with Seynabou Mbengue, director of ADEMAs to discuss activities in the private sector. It was determined that the representatives that ADEMAs work with to contact private pharmacies, could be a potential resource for RPM Plus also to spread information or monitor certain aspects, although their visits are not very frequent. The wholesalers (of which there are four in Senegal) remain the most efficient channel to pass on information to pharmacies. ADEMAs use other forums to exchange information in addition to training such as diner/débats held about once per year in different regions. It was suggested that RPM Plus could possibly integrate messages into those if the messages were short and succinct with some attractive visual aids.

The issue of generic drugs being available through the PNA was discussed and it was agreed that more of an evaluation was needed to assess if this would solve the availability problem of ORS and generic drugs in the private sector and that it was not enough to just inform the pharmacists that the drugs were available through the wholesalers. It was suggested that the list of drugs should be updated regularly and laminated and distributed to the pharmacies. Also issues such as packaging should be considered in order to ensure appropriateness for the private sector pharmacy. It was also suggested that RPM explore the mechanism of the syndicat newsletter for disseminating information.

Meeting with Professor Badiane and Dr Madické Diagne of the DPL, 10 December 2004

This meeting was an opportunity for RPM Plus to review their activities with the DPL. The DPL has been a consistent partner in RPM Plus activities in Senegal and Dr Diagne was sponsored by RPM Plus to attend the PRDU course in Rwanda in 2003. The DPL is supportive of the initiative to involve the private sector and endorsed the orientation of private pharmacists as well as the planned training of counter assistants. Their input and support was promised to the upcoming activity. An area of concern for which the DPL is requesting assistance is that of pharmacovigilance. This is particularly important with the new malaria treatments but is also important for ARVs as well as indeed all other medicines. It was felt that the university, although competent to manage the surveillance of resistance to antimalarials, were not equipped to set up a pharmacovigilance system. The DPL requests RPM Plus to assist with this.

Meeting with the syndicat of private pharmacists, 10 December 2004

A meeting was held with the president of the syndicat, Constance Faye Tuyani and Abdoulaye Ndour the president of the scientific commission of the syndicat. The progress with the orientation of private pharmacists was discussed as well as the planned activity to train the counter assistants. The syndicat offered their input in reviewing the training material as well as the follow up evaluation process. They will provide an estimate of the number of counter assistants in the USAID zones to facilitate planning of the activity.

Next Steps

Immediate Follow-up Activities

Data collection from the field is to be completed by December 22, 2004. Data input for the inventory and stock out data, ANC review and observation forms will be conducted by MSH and FHI Dakar during the end of December and early January for later analysis by RPM Plus-VA. Quantitative data from the larger pharmaceutical management and laboratory assessments will be entered by MSH and FHI in Senegal during the first weeks of January and the qualitative analysis will be conducted jointly by RPM Plus, MSH and FHI in Senegal and RPM Plus VA during January 2005. Central level interviews will be completed during the last week of December. Information from these interviews will be reviewed by Dr. Mangane, FHI in Senegal and the technical team, copied and sent to RPM Plus in Arlington, VA for analysis and interpretation. All electronic data and copies of all completed assessment forms will be sent to RPM Plus VA for analysis and interpretation.

RPM Plus to follow up and coordinate with USP on planned activities in Senegal, to determine if they will be providing assistance to the DPL to set up a system of pharmacovigilance and to explore further with the Senegal USAID Mission if necessary.

Important Upcoming Activities or Benchmarks in Program

The findings of the survey will be prepared and shared with partners at a strategy planning workshop in Dakar probably in early March, 2005 where strategies for future activities will be discussed. RPM Plus will prepare a draft of the results for discussion in the workshop and, following the workshop, RPM Plus will finalize the report complete with recommendations generated from the workshop.

A training program for counter assistants in private pharmacists in the USAID zones on the treatment of common childhood illness (ARI, Diarrhea and malaria) will be initiated during the first quarter of 2005 with close involvement of the DPL as well as the DANSE.

Recommendations.

Local RPM Plus staff should participate in the national steering committee for the implementation of the malaria policy change in order to be able to influence issues such as the packaging of the combination treatment and the planned transition to artemisinin combination therapy, which is an important aspect to consider when considering treatment at community level using lesser trained staff.

A system of pharmacovigilance is needed particularly in a country that is offering treatment with ARVs as well as transitioning to more complicated antimalarials. RPM Plus will explore with the Mission whether RPM Plus should provide TA to the DPL in setting up such a system.